

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.

P01,0225

First Named Inventor or Application Identifier

Jessica Malmberg

Express Mail Label No: EL843729460US

Only for new nonprovisional applications under 37 CFR 1.53(b)

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Specification [Total Pages 21]
2. ☒ Drawing(s) (35USC 113) [Total Pages 4]
3. ☒ Declaration and Power of Attorney [Total Pages 2]
 - a. ☒ Executed declaration
 - b. ☐ Copy from prior application (37CFR 1.63(d))
(for continuation/divisional with Box 14 completed)
 - i. ☐ [Note Box 4 Below]
DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b).

4. Incorporation By Reference (usable if Box 3b is checked)
The entire disclosure of the prior application, from which a
copy of the oath or declaration is supplied under Box 3b,
is considered as being part of the disclosure of the
accompanying application and is hereby incorporated by
reference therein.

ACCOMPANYING APPLICATION PARTS

5. ☒ Assignment Papers (cover sheet & documentation)
Siemens Elema AB
6. ☐ Letter under 37 CFR 1.41(c).
7. ☐ English Translation Document (if applicable)
8. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
9. ☐ Preliminary Amendment
10. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
11. ☐ Small Entity ☐ Statement filed in prior application,
Statement(s) Status still proper and desired
12. ☒ Certified Copies of Priority Document(s) Swedish
Application No. 0002806-8 filed August 1, 2000
13. ☐ Other:

14. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation ☐ Divisional ☐ Continuation-in-part (CIP) ☐ of prior application No: /

CLAIMS AS FILED

FEE	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) BASIC FEE \$710.00
	TOTAL CLAIMS 20	16	0	\$18.00	
	INDEPENDENT CLAIMS 3	1	0	\$80.00	
		ANY MULTIPLE DEPENDENT CLAIMS? ()YES (X) NO			
				TOTAL FILING FEE ->	\$710.00

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 501-519. A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 710.00 to cover the filing fee is enclosed.

15. CORRESPONDENCE ADDRESS

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Chicago, Illinois 60606
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SIGNATURE:

491/899:819

U-11

DATE: July 31, 2001

[illegible]


Signature of person

mailing application

Name of person mailing application